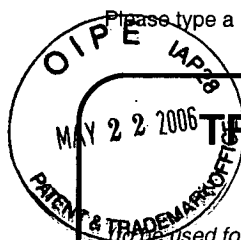


05-23-06

IPW

HDP/SB/21 based on PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → ☐

# TRANSMITTAL FORM

This form is used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> This form is used for all correspondence after initial filing)		<b>Application Number</b>	10/623,408
		<b>Filing Date</b>	July 18, 2003
		<b>First Named Inventor</b>	Kwun-Wing W. Cheung
		<b>Group Art Unit</b>	2643
		<b>Examiner Name</b>	Walter F. Briney III
<b>Total Number of Pages in This Submission</b>	19	<b>Attorney Docket Number</b>	7784-000625

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <p style="text-align: center;"><b>Postcard</b></p>
<b>Remarks</b> The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Scott T. Gray	Reg. No.	48, 891
Signature					
Date	May 22, 2006				

## CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.

Typed or printed name	Scott T. Gray		
Signature		Date	May 22, 2006

EV 726254576 US

Client Ref. No. 02-1099  
Attorney Dkt. No. 7784-000625



**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Kwun-Wing W. Cheung	:	
	:	Art Unit: 2646
Serial No: 10/623,408	:	
	:	Examiner: Walter F. Briney III
Filed: July 18, 2003	:	
	:	
For: Flat Panel Loudspeaker	:	
System For Mobile Platform	:	

Mail Stop Amendment  
Commissioner of Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action mailed February 22, 2006, please amend the application as follows and consider the remarks set forth below.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 10 of this paper.

**EV 726254576 US**